Washington State House of Representatives Office of Program Research

BILL ANALYSIS

Children & Family Services Committee

HB 3081

Brief Description: Revising provisions relating to medical and dental care and testing for children in the care of the department of social and health services.

Sponsors: Representative Rockefeller.

Brief Summary of Bill

- Requires the Department of Social and Health Services (DSHS) to recommend screening
 and, if appropriate, testing of children under 1 year of age in out-of-home care for bloodborne pathogens.
- Requires the DSHS to inform out-of-home care providers if the child to be placed in their care is infected with a blood-borne pathogen.
- Requires the DSHS to provide training related to blood-borne pathogens to licensed outof-home care providers.

Hearing Date: 2/4/04

Staff: Cynthia Forland (786-7152).

Background:

The Department of Social and Health Services (DSHS) oversees out-of-home care for children in the state who have been removed from their homes, which includes recruiting and licensing foster homes.

The DSHS is required to conduct an evaluation of all children within the foster care agency caseload to identify those children who are likely to need long-term care or assistance because they face physical, emotional, medical, mental, or other long-term challenges. In addition, all children entering the foster care system must be evaluated for identification of long-term needs within 30 days of placement.

Whenever a child is placed in out-of-home care by the DSHS or a child-placing agency, the DSHS or agency is required to share information about the child and the child's family with the care provider and consult with the care provider regarding the child's case plan.

The DSHS is required to conduct training for foster parents, which must include information concerning the following: the potential impact of placement on foster children; social service agency administrative processes; the requirements, responsibilities, expectations, and skills needed to be a foster parent; attachment, separation, and loss issues faced by birth parents, foster children, and foster parents; child management and discipline; birth family relationships; and helping children leave foster care.

No person may disclose or be compelled to disclose the identity of any person:

- who has investigated, considered, or requested a test or treatment for a sexually transmitted disease, except as authorized by law; or
- upon whom an HIV antibody test is performed, or the results of such a test.

This protection against disclosure of test subject, diagnosis, or treatment also applies to any information relating to diagnosis of or treatment for HIV infection. However, certain specified individuals may receive that information under specific circumstances. In the case of a child who is under 14 years of age, has a sexually transmitted disease, and is in the custody of the DSHS or a licensed child-placing agency, the following individuals may receive information relating to HIV testing, diagnosis, or treatment:

- a DSHS worker, a child-placing agency worker, or a guardian ad litem who is responsible
 for making or reviewing placement or case-planning decisions or recommendations to the
 court regarding the child; and
- a person responsible for providing residential care for the child when the DSHS or a licensed child-placing agency determines that it is necessary for the provision of child care services.

Whenever a child is placed in shelter care, the supervising agency may authorize evaluations of the child's physical or emotional condition, routine medical and dental examination and care, and all necessary emergency care.

Summary of Bill:

The DSHS is required to recommend that the physician or other licensed health care practitioner conducting the initial medical assessment of a child under 1 year of age following placement in out-of-home care conduct screening and, if appropriate, testing for blood-borne pathogens. The DSHS is required to obtain the results of the screening and, if conducted, testing for blood-borne pathogens and incorporate those results in the evaluation required of all children entering the foster care system for identification of long-term needs within 30 days of placement.

Upon any placement, the DSHS is required to inform each out-of-home care provider if the child to be placed in that provider's care is infected with a blood-borne pathogen, if known by the DSHS.

All out-of-home care providers licensed by the DSHS must receive training related to blood-borne pathogens, including prevention, transmission, infection control, treatment, testing, and confidentiality.

Any disclosure of information related to HIV must be in accordance with state law.

Whenever a child is placed in shelter care, the supervising agency may authorize evaluations *and treatment* of the child's physical or emotional condition, routine medical and dental examination

and care, medical testing including, but not limited to, testing conducted pursuant to this bill, and all necessary emergency care.

Whenever the court orders that a dependent child be removed from that child's home, the supervising agency may authorize evaluations and treatment of the child's physical or emotional condition, routine medical and dental examination and care, medical testing including, but not limited to, testing conducted pursuant to this bill, and all necessary emergency care.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of session in which bill is passed.